

Central Laboratory Submittal Form

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By: Mike King

Project ID: SMP

Collected By: Mike King / Nathan MurraySampling Agency: FDEP NW Dist

Local	Location: La Grange Bayou G3NW0036 Field ID ↑ STORET ↓ Barcode: G3NW0036	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2) E
Field	Middle RQ-2017-10-09-21(WBID 789) Date: 11/1/17 Time: 1035 CT	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 7.53	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STOI	Date: 11/1/17 Time: 1035 CT	Temp (C) 20.42	pH 7.45	Sample Depth 0.3	Sp. Conductance (umho/cm) 17842	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 10.57	Comments	
Lo	Location: Basin Bayou G3NW0101 Field ID ↑ STORET ↓ Barcode: G3NW0101	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) B, C, D, E
Fi	at Inlet RQ-2017-10-09-21(WBID 742) Date: 11/1/17 Time: 1130 CT	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 8.94	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
ST	Date: 11/1/17 Time: 1130 CT	Temp (C) 16.72	pH 6.74	Sample Depth 0.3	Sp. Conductance (umho/cm) 3211	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 1.69	Comments	
Lo	Location: Mullet Creek G3NW0137 Field ID ↑ STORET ↓ Barcode: G3NW0137	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) B, C, D, E, F
Fi	upstream of Hwy 20 RQ-2017-10-09-21(WBID 712) Date: 11/1/17 Time: 1240 CT	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 8.40	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
ST	Date: 11/1/17 Time: 1240 CT	Temp (C) 15.73	pH 5.71	Sample Depth 0.3	Sp. Conductance (umho/cm) 39	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.02	Comments	
Lo	Location: Mullet Creek G3NW0137 DUPLICATE Field ID ↑ STORET ↓ Barcode: G3NW0137	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) B, C, E, F, M
Fi	upstream of Hwy 20 RQ-2017-10-09-21(WBID 712) Date: 11/1/17 Time: 1245 CT	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
ST	Date: 11/1/17 Time: 1245 CT	Temp (C)	pH	Sample Depth	Sp. Conductance (umho/cm)	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments	

Relinquished By: <u>[Signature]</u>	Date/Time: 11/1/17	Shipping Method: <u>FLOK</u>	Number of Coolers Shipped:	Received By: <u>[Signature]</u>	Date/Time: 11-2-17/10:20
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Group: A	Bottle Type:	P-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	
	ALKALINITY						
	TURBIDITY						
	W-F						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 6	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 6	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	
	W-PO4-F						
Group: B	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	NW-UWF-ENQ						
	NW-UWF-FC						
Group: C	Bottle Type:	BG-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	W-AHERB-AA						
	W-SUC-AA-R						
	W-UHERB-AA						
Group: D	Bottle Type:	QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	PCR-FILTER						
Group: E	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						

Group: E	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>4</u>
	CHLSUITE-W						
Group: E	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>4</u>
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: E	Bottle Type:	P-125ML	# of Bottles: 1	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	<u>4</u>
	W-PO4-F						
Group: F	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>2</u>
	PCR-BACR						
	PCR-FILTER						
	PCR-GFD						

Central Laboratory Submittal Form

Customer: NW-DIST

Project ID: SMP

Requester: Michael King

Field Report Prepared By:

MIKE KING

Collected By:

MIKE KING / NATHAN MUINCY

Sampling Agency:

FDEP NW ROC

Location: Mullet Creek upstream of Hwy 20 RQ-2017-10-09-21 Date: 11/1/17 Time: 1220 CT		FIELD BLANK Field ID ↑		☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.52		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		B, C, E
Temp (C) 19.24		pH 8.02		Sample Depth 0.3		Sp. Conductance (umho/cm) 29135		
Salinity (ppt) 18.06		Comments						
Latitude ☐ dd ☐ dms								
Location: Rocky Bayou Mouth RQ-2017-10-09-21(WBID 722) Date: 11/1/17 Time: 1310 CT		G3NW0031 Field ID ↑ STORET ↓		☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.52		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		B, C, D, E
Temp (C) 19.24		pH 8.02		Sample Depth 0.3		Sp. Conductance (umho/cm) 29135		
Salinity (ppt) 18.06		Comments						
Latitude ☐ dd ☐ dms								
Location: CINCO BAYOU West of Cinco Bridge RQ-2017-10-09-21(WBID 843) Date: 11/1/17 Time: 1415 CT		G3NW0088 Field ID ↑ STORET ↓		☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.79		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		B, C, D, E
Temp (C) 19.22		pH 8.10		Sample Depth 0.3		Sp. Conductance (umho/cm) 31443		
Salinity (ppt) 19.62		Comments						
Latitude ☐ dd ☐ dms								
Location		Field ID		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		
Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		
Salinity (ppt)		Comments						
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms						

Relinquished By:	Date/Time 11/1/17	Shipping Method FEDEX	Number of Coolers Shipped:	Received By:	Date/Time 11-2-17 / 10-20
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Group: A	Bottle Type:	P-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	
	ALKALINITY						
	TURBIDITY						
	W-F						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 6	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 6	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	
	W-PO4-F						
Group: B	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	NW-UWF-ENQ						
	NW-UWF-FC						
Group: C	Bottle Type:	BG-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	W-AHERB-AA						
	W-SUC-AA-R						
	W-UHERB-AA						
Group: D	Bottle Type:	QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	PCR-FILTER						
Group: E	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						

Group: E	Bottle Type: BP-1L	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	3
CHLSUITE-W					
Group: E	Bottle Type: P-500ML	# of Bottles: 1	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	3
W-NH3					
W-NO2NO3					
W-S-A-TP					
W-TKN					
W-TOC					
Group: E	Bottle Type: P-125ML	# of Bottles: 1	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	3
W-PO4-F					
Group: F	Bottle Type: QPCR-P-250ML	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	
PCR-BACR					
PCR-FILTER					
PCR-GFD					

Date of Request: 14-SEP-2017
 Created By: KING_M On: 14-SEP-2017
 Modified By: SWANSON_C On: 18-SEP-2017
 Customer: NW-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: Northwest District
 Sampling Event: ENR C WBID 49A 722 742 789 712

Send Coolers To:

Phone: SC-595-0605
 160 Government Center
 Suite 308
 Pensacola, FL 32502-5794
 Attn: Michael King

Send Final Report To:

160 Government Center
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Program Module Number: 1306
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WHITE_R On: 15-SEP-2017
 Biology Request Reviewed By: SWANSON_C On: 18-SEP-2017
 Sampling Kit Required: YES Ship on: 28-SEP-2017
 Sampling Kit Shipped: YES On: 28-SEP-2017
 Sampling Kit Packed By: SHAIK_A
 Preservatives Needed: NO
 Date to Receive Samples: 09-OCT-2017
 Received By: SHAIK_A On: 02-NOV-2017

Report Type: Final Only
 FTP Data: NO
 QC Report: YES
 Date Log: NO
 Authorization Log: NO

Comments:**Bottle Group A (Water) With 6 Samples:**

Bottle Type: P-1L	Number of Bottles: 6	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 6	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 6	Preserved With: ICE And H2SO4
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 6	Preserved With: FILTER-ICE
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Bottle Group B (Water) With 5 Samples:

Bottle Type: TEST HAS NO	Number of Bottles: 5	Preserved With: ICE
NW-UWF-ENQ	Template: DEFAULT	(Enterolert/QT) Enterococci by Enterolert Quanti-Tray method by UWF Overflow Laboratory for NWD
NW-UWF-FC	Template: DEFAULT	(SM 9222 D) Fecal coliforms by membrane filter method by UWF Overflow Laboratory for NWD

Bottle Group C (Water) With 5 Samples:

Bottle Type: BG-1L	Number of Bottles: 5	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

Bottle Group D (Water) With 2 Samples:

Bottle Group D (Water) With 2 Samples:

Bottle Type: QPCR-P-250ML Number of Bottles: 4 Preserved With: ICE
 PCR-FILTER Template: DEFAULT (SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis

Bottle Group E (Water) With 1 Samples:

Bottle Type: P-500ML Number of Bottles: 1 Preserved With: ICE And H2SO4
 W-NH3 Template: DEFAULT (EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
 W-NO2NO3 Template: DEFAULT (EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
 W-S-A-TP Template: DEFAULT (EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
 W-TKN Template: DEFAULT (EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
 W-TOC Template: DEFAULT (SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
 Bottle Type: P-125ML Number of Bottles: 1 Preserved With: FILTER-ICE
 W-PO4-F Template: DEFAULT (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L
 Bottle Type: P-1L Number of Bottles: 1 Preserved With: ICE
 ALKALINITY Template: DEFAULT (SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/L
 TURBIDITY Template: DEFAULT (EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
 W-CL-IC Template: DEFAULT (EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
 W-COLOR Template: DEFAULT (SM 2120 B) True Color measured at 450 nm
 Color (true)
 W-F Template: DEFAULT (SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
 W-SO4-IC Template: DEFAULT (EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
 W-TDS Template: DEFAULT (SM 2540 C-97) Total Dissolved Solids in aqueous matrices
 W-TSS Template: DEFAULT (SM 2540 D-97) Total Suspended Solids in aqueous matrices
 Bottle Type: BP-1L Number of Bottles: 1 Preserved With: ICE
 CHLSUITE-W Template: DEFAULT (SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry

Bottle Group F (Water) With 1 Samples:

Bottle Type: QPCR-P-250ML Number of Bottles: 2 Preserved With: ICE
 PCR-BACR Template: DEFAULT (SOP-PCR-1.4) Detection and quantification of Ruminant specific Bacteroidetes BacR genetic marker with quantitative polymerase chain reaction
 PCR-FILTER Template: DEFAULT (SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
 PCR-GFD Template: DEFAULT (SOP-PCR-1.3) Detection and quantification of bird specific Helicobacter GFD genetic marker with quantitative polymerase chain reaction

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

Log-in Checklist

RQ- 2017-10-09-21

Shipping Method: FedEx

Date/Time of Receipt: 11-2-17 11:20

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
Recd	3.1C	15 17		/			7552-9824-4647
Recd	1.4C	12		/			
Recd	2.9C	14		/			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

**Note: If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ☒ No ☐

CONTAINER CHECK

**Evidence Tape on Bottles? Yes ☐ No ☒ If yes, is it intact? Yes ☐ No ☐

**Caps on tight? Yes ☒ No ☐ **Containers intact? Yes ☒ No ☐

**Sufficient Sample Volume: Yes ☒ No ☐

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CI-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: ATB

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☐ NA ☐ Init: ATB

Coolers Unpacked/Checked by: ATB Date: 11-2-17

NCRs (Y/N)? /

Event ID: ENR C WBID 49A 722 742 789 712
NW-DIST-2017-11-02-02 (SMP)
Date Received: 02-NOV-2017 10:20

NCR #

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes _____ No _____

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes _____ No _____

If no, were samples shipped on dry ice? Yes _____ No _____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes _____ No _____

Date and time samples preserved: _____

Additional Comments:

11/1/7
Phone 850 5 120015
any ~~TO TALLAHASSEE~~ **FDPP NW RX**
ss **FLORIDA DEPT/GOVERNMENT ST**
Dept./Floor/Suite/Room
Pensacola State **FL** ZIP **32502**

Internal Billing Reference

11/1/7 **SAMPLE RECEIVING** Phone **850 245-8085**
any **FLORIDA DEP/CHEMISTRY SECTION**
ss **2600 BLAIRSTONE RD**
Dept./Floor/Suite/Room
not deliver to P.O. boxes or P.O. ZIP codes.
HSS
Use this line for the HSS location address or for continuation of your shipping address.
TALLAHASSEE State **FL** ZIP **32399**



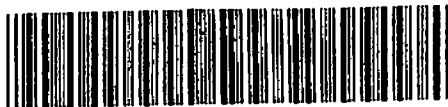
8119 7780 5498

0127857428

1 From
Date 11/1/7
Sender's Name **MIKE** Phone **850 5950605**
Company **FDPP NW RX**
Address **1100 W GOVERNMENT ST**
City **Pensacola** State **FL** ZIP **32502**
Dept./Floor/Suite/Room

2 Your Internal Billing Reference

3 To
Recipient's Name **SAMPLE RECEIVING** Phone **850 245-8085**
Company **FLORIDA DEP/CHEMISTRY SECTION**
Address **2600 BLAIRSTONE RD**
We cannot deliver to P.O. boxes or P.O. ZIP codes.
Dept./Floor/Suite/Room
Address
Use this line for the HSS location address or for continuation of your shipping address.
City **TALLAHASSEE** State **FL** ZIP **32399**



8119 7780 5524

0127857428

4 Express Package Service *To meet location:

Next Business Day
☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
☒ FedEx Priority Overnight
Next business morning. *Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight
Next business afternoon. *Saturday Delivery NOT available.
☐ FedEx
See S&S
☐ FedEx
Second business day. *Delivery is a.
☐ FedEx Expr
Third business day. *Saturday Delivery

5 Packaging *Declared value limit \$500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box

6 Special Handling and Delivery Signature Options Fees may apply.

☐ Saturday Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day AM, or FedEx Express Saver.
☐ No Signature Required
Package may be left without obtaining a signature for delivery.
☐ Direct Signature
Someone at recipient's address may sign for delivery.
☐ Indirect S
If no one is at address, someone at neighboring address may sign for residential delivery only.
Does this shipment contain dangerous goods?
One box must be checked.
☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice
Dry Ice, 6 UN 1845
Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No.
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Chk
Total Packages **1** Total Weight **60** lbs. Credit Card Auth. **611**

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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4 Express Package Service *To meet location:

Packages up to 150 lbs.
For packages over 150 lbs., use the FedEx Express Freight US Airbill.

Next Business Day
☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
☒ FedEx Priority Overnight
Next business morning. *Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight
Next business afternoon. *Saturday Delivery NOT available.
2 or 3 Business Days
☐ FedEx 2Day AM
Second business morning. *Saturday Delivery NOT available.
☐ FedEx 2Day
Second business afternoon. *Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Express Saver
Third business day. *Saturday Delivery NOT available.

5 Packaging *Declared value limit \$500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

☐ Saturday Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day AM, or FedEx Express Saver.
☐ No Signature Required
Package may be left without obtaining a signature for delivery.
☐ Direct Signature
Someone at recipient's address may sign for delivery.
☐ Indirect Signature
If no one is available at recipient's address, someone at a neighboring address may sign for delivery for residential addresses only.
Does this shipment contain dangerous goods?
One box must be checked.
☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice
Dry Ice, 6 UN 1845
Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No.
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check
Total Packages **1** Total Weight **60** lbs. Credit Card Auth. **611**

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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01000

FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8119 7780 5513

1 From

Date 11/17

Sender's
Name

MIKE KING

Phone 850 575 1105

Company

FIDP N.Y. ROC

Address

160 J. GOVERNMENT ST

Dept./Floor/Suite/Room

City

POMPAICOLA

State FL

ZIP 32502

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone 850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRESTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

TALLAHASSEE

State FL

ZIP 32399

Hold Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.Hold Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.

8119 7780 5513

0215

4 Express Package Service

* To meet location.

Packages up to 150 lbs.
For packages over 150 lbs., see the
FedEx Express Freight US Airbill.

Next Business Day

- ☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☒ FedEx Priority Overnight
Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ FedEx Standard Overnight
Next business afternoon.* Saturday Delivery NOT available.

2 or 3 Business Days

- ☐ FedEx 2Day A.M.
Second business morning.* Saturday Delivery NOT available.
- ☐ FedEx 2Day
Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ FedEx Express Saver
Third business day.* Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

- ☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

- ☐ Saturday Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.
- ☐ No Signature Required
Package may be left without obtaining a signature for delivery.
- ☐ Direct Signature
Someone at recipient's address may sign for delivery.
- ☐ Indirect Signature
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?

- One box must be checked.
☒ No ☐ Yes
As per attached Shipper's Declaration. ☐ Yes
Shipper's Declaration not required.
- ☐ Dry Ice
Dry Ice, 9 UN 1845 _____ kg
- ☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip.
Acct. No.

- ☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

Your liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

611

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